TOWN OF NORWOOD 2015 PLAY CAMP APPLICATION FOR EMPLOYMENT

Recreation Department

165 Nahatan Street Norwood, MA 02062 781-762-0466



PLEASE FILL IN YOUR INFORMATION: (Please Print)

Name:		Social Security (Optional)_	-					
Home Address:								
Home Phone:		Cell Phone:						
E-mail:								
PLEASE CI	HECK THE A	REAS IN WHICH YOU	ARE INTERESTED					
☐ Playcamp ☐ C prefer to work with	challenger	K-1 □ 2-5 □ 6-8 □ Any grade						
•		ecreation Department? Yes No nat capacity?						
•	· ·	you planning to take time off or leave Yes						
Please list days and times available: Playcamp runs 9-4pm, with extended care from 8-5pm, depending on program								
Monday	to	Tuesday	to					
Wednesday	to	Thursday	to					
Friday	to							

EMPLOYMENT HISTORY										
Employer Name	Job Title		Dates of Employment		Supervisor		Reason for Leaving			Starting to Ending Rate of Pay
EDUCATION										
	Nam	e of Schoo	ı	Major		Years Co	mpleted		Cou	ırse Study
High School										
Undergraduate College										
Graduate College										
ACTIVITY INVOLVEMENT– SPORTS, CLUBS, ETC										
ACTIVITY NAME		POSITION		HELD		YEARS INVOLVED		ACTIVITY LEADER NAME		
REFERENCES- PLEASE DO NOT INCLUDE ANY FAMILY										
NAME AND ADDRESS						PHONE				

RELATED QUESTIONS (Please use back, if nee	eded)
Why are you interested in working at the Norwood Recreation gain?	on Department this summer? What do you hope to
What are some qualities, assets or characteristics you posses position?	•
How would you ensure that you provide a great experience	for our patrons this summer?
Who is your role model? What qualities do they have to ma	ke them someone you look up to?
PERSONAL INFORMATION	
The Town of Norwood is an equal opportunity employer M/F national origin, age disability, marital or veteran status, sexu	
If under 18 years of age, can you provide proof of work eligib	
Are you prevented from lawfully becoming employed in this ☐ Yes ☐No Proof of citizenship or immigration status will be required up	
Have you been convicted of a felony in the past 7 years? ☐ N	
I certify that the above information is correct and complete to misrepresentation or omission of pertinent facts may be con- offer of employment. Further I agree to take a pre-employment position and realize that any offer for employment may be con-	sidered cause for termination or the withdrawal of any ent physical by the Town physician if required for my
Signature:	Date: